



PTO/SB/17 (12-04)  
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)  
1150.00

### Complete if Known

Application Number	10/827,313
Filing Date	April 20, 2004
First Named Inventor	Shiro YAMAOKA
Examiner Name	Hai H. Huynh
Art Unit	3747
Attorney Docket No.	056205.51565C2

### METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):  
☒ Deposit Account Deposit Account Number: 05-1323 (Docket No. 056205.51565C2) Deposit Account Name: 23911  
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under 37 CFR 1.16 and 1.17

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>		
-20 or HP	x	=
HP = highest number of total claims paid for, if greater than 20		
<b>Indep. Claims</b>		
-3 or HP	x	=
HP = highest number of total claims paid for, if greater than 3		

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	Round up to a whole number x	=	

#### 4. OTHER FEES

Petition for Extension of Time (three (3) months)	Fee Paid (\$)
Terminal Disclaimer	\$1020.00
	\$ 130.00

### SUBMITTED BY

Signature	Registration No.	Telephone
Name (Print/Type)	(Attorney/Agent) 32,390	(202) 624-2500
Richard R. Diefendorf		Date January 12, 2006

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